Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |                             |   |                                     |                  |   | SMALL ENTITY TYPE   |                        |     | OTHER THAN<br>R SMALL ENTITY |                        |
|---|---|---|-----------------------------|---|-------------------------------------|------------------|---|---------------------|------------------------|-----|------------------------------|------------------------|
| TOTAL CLAIMS  |   |   | 24                          |   |                                     |                  |   | RATE                | FEE                    |     | RATE                         | FEE                    |
| FOR   |   |   | NUMBER FILED                |   | NUMBER EXTRA                        |                  | В | ASIC FEE            | 375.00                 | OR  | BASIC FEE                    | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |   | 7 4 minus 20=               |   | * 4                                 |                  |   | X\$ 9=              |                        | OR  | X\$18=                       |                        |
| INDEPENDENT CLAIMS  |   |   | 6 mir                       | us 3 =                                      | * 3                                 |                  | T | X42=                |                        | OR  | X84=                         |                        |
| MU  | TIPLE DEPEN                             | DENT CLAIM PR                               | RESENT                      |   |                                     |                  | Γ | +140=               |                        | OFI | +280=                        |                        |
| * If the difference in column 1 is less than 2  |   |   |                             | ro, enter "0" in column 2                   |                                     |                  |   | TOTAL               |                        | OR  | TOTAL                        | 1074                   |
|   | CI                                      | _AIMS AS A                                  | MENDED - PART II (Column 2) |   |                                     | (Column 3)       |   | SMALL E             | NTITY                  | OR  | OTHER<br>SMALL               |                        |
| NTA   | ,                                       | CLAIMS REMAINING AFTER AMENDMENT            |                             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |                                     | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                         | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT A   | Total                                   | *   | Minus                       | **  |                                     | =                |   | X\$ 9=              |                        | OR  | X\$18=                       |                        |
|   | Independent                             | *   | Minus                       | ***   |                                     | =                |   | X42=                |                        | OR  | X84=                         |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDEN |   |                             |   | IT CLAIM                            | ل_               |   | +140=               |                        | OR  | +280=                        |                        |
| '   | 1,5,9,13,17,21                          |   |                             |   |                                     |                  |   | TOTAL               |                        | OR  | TOTAL<br>ADDIT. FEE          |                        |
|   |   | (Calumn 1)                                  |                             | (Colu                                       | umn 2)                              | (Column 3)       | A | DDIT. FEE           |                        |     | ADDIT: I LL                  |                        |
| AMENDMENT B   |   | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                             | HIG<br>NU<br>PREV                           | HEST<br>MBER<br>YOUSLY<br>D FOR     | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                         | ADDI-<br>TIONAL<br>FEE |
|   | Total                                   | *   | Minus                       | **  |                                     | =                |   | X\$ 9=              |                        | OR  | X\$18=                       |                        |
|   | Independent                             | *   | Minus                       | ***   | IT OI A 114                         | =                |   | X42=                |                        | OR  | X84=                         |                        |
| F   | FIRST PRESE                             | NTATION OF M                                | IULTIPLE DE                 | PENDER                                      | NI CLAIM                            |                  | \ | +140=               |                        | OR  | +280=                        |                        |
|   |   |   |                             |   |                                     |                  | L | TOTAL<br>ADDIT. FEE |                        | OR  | TOTA<br>ADDIT. FEI           |                        |
|   |   | (Column 1)                                  |                             |   | umn 2)                              | (Column 3)       |   |                     |                        | _   |                              |                        |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                             | PRE   | GHEST<br>IMBER<br>VIOUSLY<br>ID FOR | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                         | ADDI-<br>TIONAL<br>FEE |
|   | Total                                   | *   | Minus                       | **  |                                     | =                |   | X\$ 9=              |                        | OR  | X\$18=                       |                        |
| ME  | Independent                             | *   | Minus                       | ***   | NE OLAIN                            | =                |   | X42=                |                        | OR  | X84=                         |                        |
| L   | FIRST PRES                              | ENTATION OF I                               | IULTIPLE DEPENDE            |   | NI CLAIM                            |                  | 1 | +140=               |                        | OR  | +280=                        |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |   |   |                             |   |                                     |                  |   |                     |                        | 4   | TOTA                         |                        |
| ** If the entry in column 1 is less than the entry in column 2, while of in standards of the entry in column 1 is less than the entry in column 2, while of in standards of the entry in column 2, while of in standards of the entry in column 1.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                             |   |                                     |                  |   |                     |                        |     |                              | E <b>L</b>             |